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| SERIAL NUMBER 09/421,580 | FILING DATE 10/20/99 | CLASS 345 | GROUP ART UNIT 2175 2/13 | ATTORNEY DOCKET NO. 98-0865 |
|-----------------------------|-------------------------|--------------|-----------------------------|--------------------------------|

APPLICANT

KIM C. SMITH, COLLEYVILLE, TX; THEODORE DAVID WUGOFSKI, FORT WORTH, TX;
MICHAEL MOSTYN, FLOWER MOUND, TX; THOMAS A. KAYL, SIOUX CITY, IA.

CONTINUING DOMESTIC DATA*** NONE
VERIFIED

ml

371 (NAT'L STAGE) DATA*** NONE
VERIFIED

ml

FOREIGN APPLICATIONS***
VERIFIED

NONE

ml

BEST AVAILABLE COPY

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/10/99

| | | | | | | |
|---|---|--|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY TX | SHEETS DRAWING 12 | TOTAL CLAIMS 52 | INDEPENDENT CLAIMS 4 |
| Verified and Acknowledged | Examiner's Initials <i>ml</i> | Initials | | | | |

ADDRESS

GATEWAY INC
ANTHONY CLAIBORNE
610 GATEWAY DRIVE MAIL DROP Y-04
NORTH SIOUX CITY SD 57049-3199

Cust NO. 24333

TITLE

SIMULATED THREE-DIMENSIONAL NAVIGATIONAL MENU SYSTEM

| | | |
|------------------------------------|--|---|
| FILING FEE RECEIVED \$1,414 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: _____ | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|--|---|